



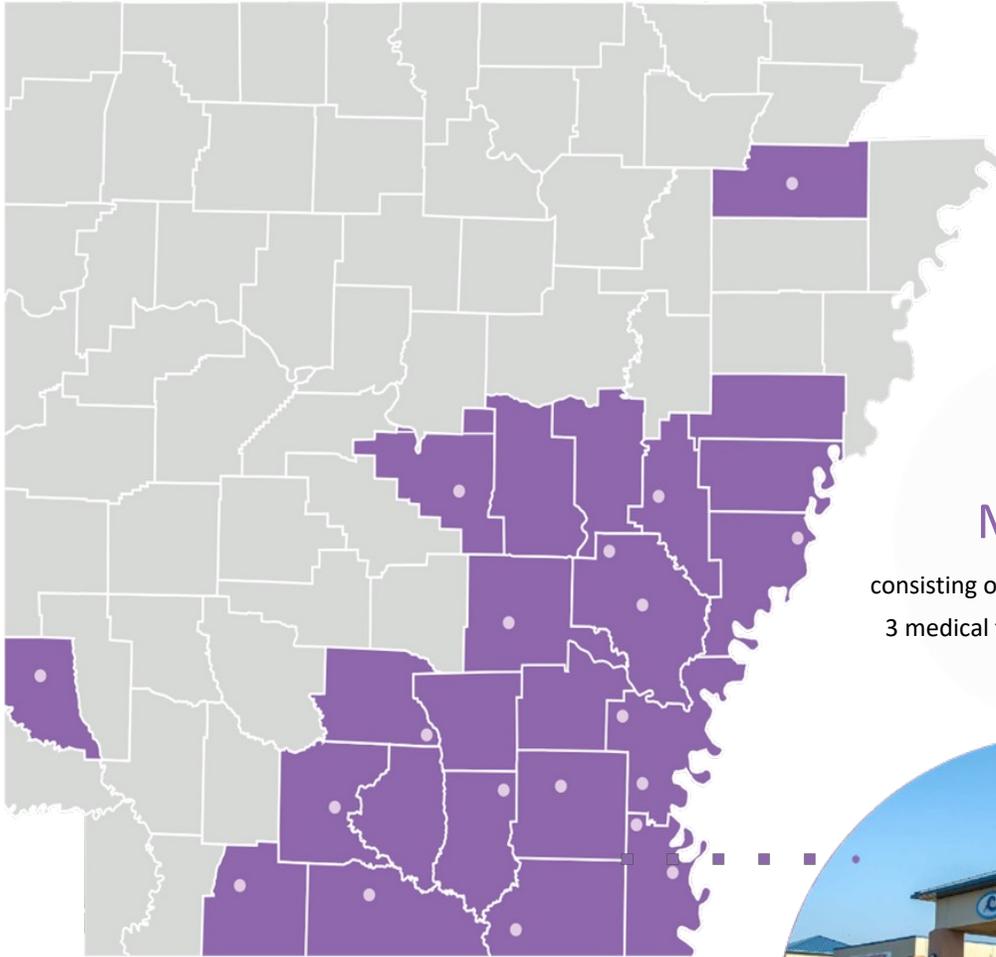
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Delta Regional Authority DOL WORC Grant Workshop



Growing the Healthcare Workforce

EXPANDING OUR REACH



Between July 2019 – September 2022, ARHP added eight new member organizations representing rural hospitals (Ouachita County Medical Center, Helena Regional Medical Center, Sevier County Medical Center, Forrest City Medical Center), Federally Qualified Health Centers (Mid-Delta Health Systems, Mainline Health Systems), and two osteopathic medical schools (NYIT College of Osteopathic Medicine – Jonesboro and Arkansas College of Osteopathic Medicine- Fort Smith).

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MEMBERS

consisting of 16 rural hospital members,
3 medical teaching institutions, and 2
FQHCs



897K+ Total population service area: 897,271

92+ Together, ARHP members have over 90 owned or affiliated clinics.

24 ARHP serves 24 counties throughout South Arkansas

BUILDING SCHOLARSHIPS

HEALTH BUSINESS OPERATIONS INITIATIVE

(UA Grantham Partnership)

- Participants across 23 counties
- Growing trained and skilled healthcare staff through accessible degree programs
- Directly impact the financial viability and sustainability of hospitals

Proposed Program Tracks

- Medical Coding and Billing
- Health Information Management
- Clinical Documentation
- Healthcare Administration

CONNECT TO TECH

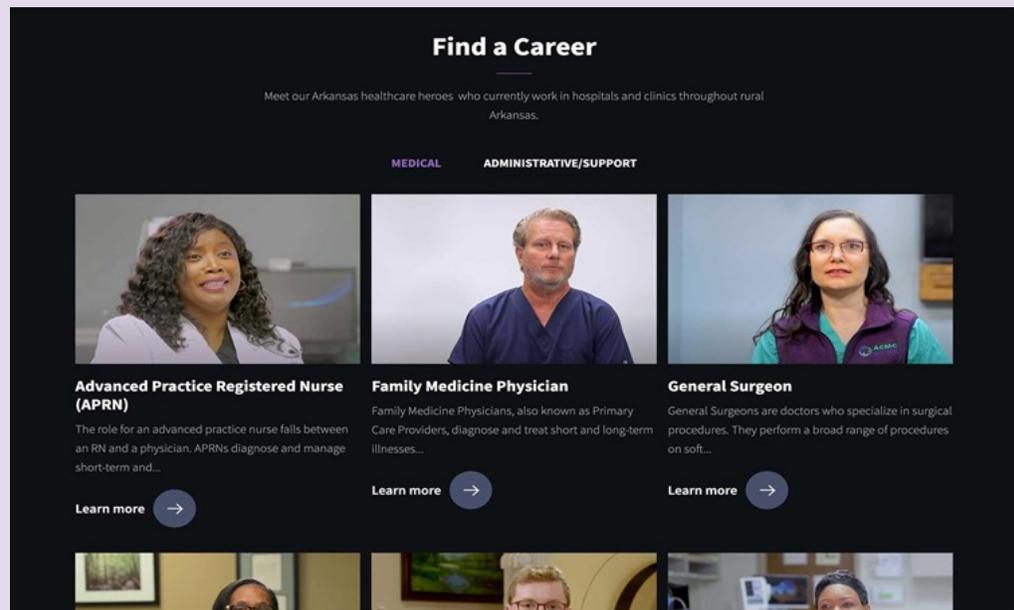
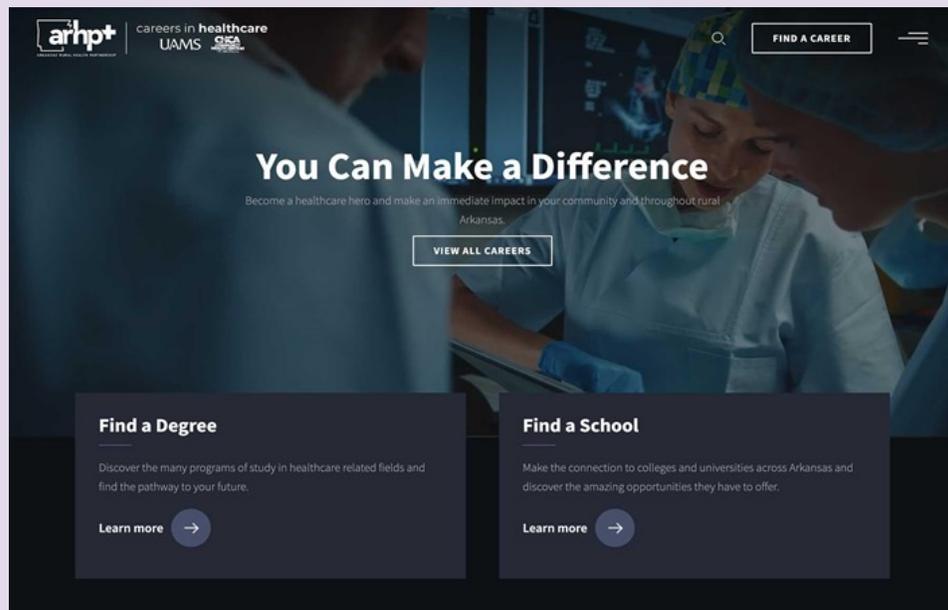
(PCCUA and UAM Partnership)

- 70 Arkansas Delta Students
 - Apprenticeships
 - One-on-one support
 - Community health worker training
 - Career Placement
- Degrees offered: Health Information Technology and Behavioral Health Technology
- Directly impacts the existing local healthcare workforce needs



ARHP WORKFORCE WEBSITE

This website will be downloaded onto large smart boards on the workforce mobile unit that will travel to rural high schools, MASH and CHAMPS programs, community events, and community colleges educating on healthcare careers, educational pathways, and scholarship opportunities.



<https://careers.arruralhealth.org/>

- ***Statement of Need: the foundation of the application***
- *Statement of Need and Strategic Alignment*



Description of Area to be Served and Identified Needs

Description (Example): The proposed project will serve X counties located in X. Counties include. The service area is marked by poverty (23%), unemployment (4.6%), low educational attainment (83.4% high school completion/15.3% completing bachelor's degree or higher), poor infrastructure (including road systems and lack of public transit), and an educational system that struggles to meet state or national standards. All of these factors play a large role in the challenge to recruit, train, and maintain a local health workforce.

Identified Needs (Example):

- The lack of qualified providers places a strain on rural healthcare systems to offer quality services and keep patients from moving care to larger, urban centers (outward migration rate at a 12.4% population loss). Ultimately, these factors compound to negatively impact the quality of life for residents, including poor health outcomes, higher rates of chronic disease and shortened length of life (average life expectancy of 73.7 years) in comparison to Arkansas residents outside of the Delta region.
- A new program, the Arkansas Health and Opportunity for Me (ARHOME), will replace Arkansas Works and expand beyond health insurance coverage to include the provision of behavioral and mental health services and support within rural hospitals, and support to young adults as they transition from military service, incarceration, substance use, and/or foster care. Rural hospital and FQHC partners will play a critical role in the implementation and success of this new statewide program.
- While health information technology (HIT), telehealth service delivery, and behavioral health technology (BHT) positions will exponentially grow in the region, few young adults are aware of the need and career opportunity. In preparation for the upcoming surge in technology-related health workforce positions and demonstrated existing need, the proposed project (Connect to Tech AR) will recruit and assist 70 students to successfully complete HIT, BHT, and telehealth certification, training, and/or degree programs.

Target Population.

Who: The proposed project will serve new entrants to the workforce. The applicant will target recruitment efforts to high school students & recent graduates, returning military, persons experiencing a lapse in employment due to substance use and/or incarceration, and women re-entering the workforce after caregiving, as they all meet the “new entrants to the workforce” definition by an extended lapse in employment or no work history.

Why: The target population was selected based on several factors, including: 1) the demographics of individuals entering certificate and/or associate degree programs, 2) the level and length of training/education period required, 3) the desire to recruit individuals looking for training & career opportunities without the need for a bachelor's degree or above, 4) an organizational priority to serve as a health career pipeline, particularly for minority and marginalized groups, and 5) organizational experience in serving persons in substance use treatment and recovery. For recruitment plans per subpopulation, **see Table 1.**



Recruitment Efforts

Table 1. Recruitment Efforts

High school students & recent graduates: Coordinate visits to local high schools & engage guidance counselors in disseminating information about program availability; utilize workforce mobile unit

Returning military: Engage veteran's groups, National Guard stations, and nearby military bases to share information about program for individuals discharged from and/or retiring from the military

Substance use history and/or recent incarceration: Peer recovery specialists (existing ARHP staff) will inform individuals in recovery of training opportunities and connect to program as relevant

Women re-entering the workforce: Special social media & print campaigns will be developed to advertise program; print materials shared at churches, grocery stores, schools, daycares, libraries, etc.

Energy field: Special social media campaign developed to inform & recruit population

DRA Federal Plan: The proposed project aligns with DRA's Federal Plan Regional Authority's Regional Development Plan goals; including **Goal 1. Improved Workforce Competitiveness** by improving workforce readiness by providing apprenticeships (HIV and BHT apprenticeships in participating healthcare organizations). The proposed project connects institutions of higher education to healthcare organizations which are the largest employers in their respective Delta communities. Building a healthcare technical workforce that can increase the capacity of these small healthcare organizations will create their ability to recruit and provide additional healthcare services in the region. By creating the ability for these Delta healthcare organizations to provide better care and increase the capacity to provide telehealth services with a talented and educated workforce; patients will remain locally to receive healthcare services instead of driving hours to larger hospitals and services.

DRA State Plan: The proposed project aligns with the DRA State of Arkansas Delta Development Plan's priorities including **1) Create or Retain Jobs**. The proposed project will support individuals living in south Arkansas Delta communities to successfully move through the health workforce pipeline and into career placement (health information technology (HIT) and telehealth fields) with a local healthcare partner. The Arkansas Rural Health Partnership (applicant) will engage education (high schools, colleges & universities), healthcare (hospitals, federally qualified health centers & clinics) and local workforce (economic development) partners across the Delta region to recruit, train, mentor, and employ 70 individuals across the three-year period of performance. By creating the ability for these Delta healthcare organizations to provide better care and increase the capacity to provide telehealth services with a talented and educated workforce; patients will remain locally to receive healthcare services instead of driving hours to larger hospitals and services- and small Arkansas Delta hospitals will survive and thrive retaining numerous jobs in these small communities.

WIOA State Plan. The proposed project aligns with WIOA Employment and Training programs within the Arkansas Division of Workforce Services and within the following core programs- the Adult program (Title I of WIOA), the Dislocated Worker program (Title I), and the Youth program (Title 1). The proposed program will work with local Workforce offices to recruit these SNAP recipients into the Connect to Tech AR project that will provide funding for them to participate in health information technology and training programs that will lead to employment opportunities in their respective communities.

Alignment with Strategic Plan. (Example)

Barriers & Challenges (Examples)

| Factors that May Impact Success | Strategies to Reduce Challenges |
|--|---|
| Lack of interest in or knowledge about health technology careers | Print, web & social media campaigns are crafted to reach different subpopulations; Material is widely disseminated throughout the region, including schools, churches, libraries, civic clubs, etc. |
| Education partners have trouble recruiting & retaining enough HIT/BHT students to fill classes & meet demand | Project staff will work closely with partners and community members to widely disseminate materials & messaging . Students will be provided continuous, one-on-one support to assist in program completion. Paid apprenticeships and job placement within partner organizations will also support efforts. |
| Difficulty attending in-person classes due to transportation challenges, distance to campus, and/or COVID-19 surge | The project will educate students in a variety of settings and sites, including the traditional classroom (college partners), simulation training (using the ARHP mobile training unit), and/or attendance of virtual classes at a satellite telehealth resource center (2). |
| Lack of financial resource to engage in certificate & degree programs (HIT/BHT) | Program participants will receive tuition assistance (including books & laptop), paid apprenticeships, and free additional training (telehealth & community health worker certifications) to reduce financial burden of education & lost wages. |
| Rural healthcare partners have limited resource to recruit & retain new health workforce | The program will offer paid apprenticeships for students at partner healthcare organizations. This will create new exposure for the healthcare sector to recruit new hires without having to incur the cost of recruitment or apprenticeship. All students will complete CHW training so that positions are reimbursable. |

| Name of Partner | Roles & Responsibilities | Value of Partnership |
|--|---|--|
| Arkansas Rural HealthPartnership (ARHP) | Applicant, Program &Fiscal Management, Apprenticeship & JobPlacement Site | Organization is a collaboration of hospitals,clinics, and FQHCs throughout the service area with leadership at the table |
| Southeast Arkansas Economic Development District | Local Workforce Development Partner, Connect individuals toapprenticeships | Brings needed resources through local economic development opportunities and a partner for student recruitment; knowledgeof needs and barriers of incoming students |
| University of Arkansasat Monticello-College of Technology-Crossett | Education Partner (10-month certificate program: HIT with telehealth concentration) | A local college that can assist with student education and retention as well as grow withthe needs of healthcare organizations in the region |
| Phillips CommunityCollege of the University of AR | Education Partner (2-yr degree: Behavioral Health Technology) | A local college that can assist with student education and retention as well as grow withthe needs of healthcare organizations in the region; regional reach of campus across the service area |
| University of Arkansasfor Medical Sciences (UAMS) Institute for Digital Health | Training Partner (telehealthcertification) | Talented staff are knowledgeable on the application of studies and how to implementand execute telehealth services |
| ARHP MemberHospitals (17)* | Apprenticeship & JobPlacement Sites | Committed organizations with a need forHealth Information staff that is knowledgeable to assist with IT and telehealth and cross-trained as CHWs |

Project Partnerships.

Expected project results & sustainability (examples)

Expected Results. The project will engage healthcare (16), education (3), telehealth resource centers (2) and workforce partners (2) in the region to accomplish the following results within the three-year grant period: 1) increase the # of students enrolled in local HIT certificate (40) & BHT 2-yr degree programs (30), 2) decrease financial barriers to training & education for 70 individuals, 3) increase the # of students completing local HIT certificate (40) & BHT 2-yr degree programs (30), 4) increase the # of students engaged in local healthcare apprenticeships (70), 5) increase the # of local graduates hired into HIT & BHT jobs with local partners (70), and 6) increase the # of new health workforce cross-trained as CHWs (70). For the project timeline with defined activities, **see Attachment 2.**

Long-Term Benefits (Sustainability). Long-term benefits of the project include: 1) increase locally available healthcare services, 2) decrease outward migration of young adults in rural Delta communities, 3) increase rural healthcare system sustainability & viability, and 4) improve health outcomes and quality of life for rural south Arkansas Delta residents.

Achieving WORC Initiative Goal. The WORC goal is to: *create economic prosperity, gainful employment, and high-quality career outcomes for workers who reside in the Appalachian and Delta regions, enabling them to remain and thrive in these communities.* The proposed project will achieve this goal in the Delta region by: 1) increasing student enrollment in local HIT and BHT certificate and degree programs, 2) increasing the recruitment, training, hiring, and retention of local talent in the Delta region, 3) increasing the functionality, financial viability, and sustainability of local employers (healthcare organizations) that support community members & economies.

| Activities | Expected Results |
|--|---|
| Total participants obtaining new or enhanced employment (required result) | 70 (job placements of new entrants to the workforce entering a career pathway) |
| 1 HIT/BHT apprenticeship program developed | 40 HIT certification workers & 30 BHT 2-year degree awarded a credential |
| 70 students provided tuition assistance & one-on-one support through schooling | 40 individuals gain HIT certification, 30 individuals complete a 2-yr BHT degree (particular increase in underrepresented students) |
| 70 students are cross-trained in CHW model | 70 individuals are prepared to meet existing & future health workforce gaps in region; positions are reimbursable, lead to increased sustainability |
| 70 students will complete telehealth modules (2) with IDHI | 70 trained individuals assist hospitals & clinics to meet the needs of patients locally via telehealth resources |

Results to be Achieved by the End of the Grant Cycle (Example)

| Provide telehealth and health information technology (HIT) training opportunities through paid apprenticeships at partnering healthcare organizations (ARHP health system partners) throughout the Arkansas Delta region | | | |
|---|----------------------|-----------------------|-----------------|
| Activities | Year I | Year II | Year III |
| Hire the Recruitment & Placement Coordinator to assist students. | October 2021 | - | - |
| Work with ARHP member hospitals and clinics (as well as other healthcare organizations serving the Arkansas Delta) to organize paid apprenticeships for students participating in the program | - | October 2022- Ongoing | Ongoing |
| Match students with healthcare organizations for paid apprenticeships | - | January 2023- Ongoing | Ongoing |
| Students complete locally available, paid apprenticeships in the HIT & telehealth field | - | Ongoing | Ongoing |
| Provide ongoing support and resources to participating students throughout their educational and on-site experiences | | | |
| Activities | Year I | Year II | Year III |
| Project staff provide ongoing one-on-one support and resources to students to ensure successful matriculation through pipeline | August 2022- ongoing | Ongoing | Ongoing |
| Provide job placement assistance and coordination for participants in the project | | | |
| Activities | Year I | Year II | Year III |
| ARHP staff maintain a current list of health career job openings at partner hospitals & clinics on Job Board (ARHP website) | Ongoing | Ongoing | Ongoing |
| Project staff assist students with securing job placement within a local healthcare organization upon completion of certificate or associate's degree program | - | June 2023- ongoing | Ongoing |

Project Timeline (Example)

Organizational & Administrative Capacity

Organizational and Fiscal Capacity. Discuss the organization's structure and capacity to manage the grant funds. Include relevant past successful grant funding and operational functions of staff.



Administrative Capacity. Discuss qualifications of organizational and financial management team and leadership. Describe the structure of organization and where this project will fit in the organizational chart.



Be honest! There will be a site visit at some point during the grant period.

Budget Narrative Template (Example)

| Personnel | Year I | Year II | Year III | Total |
|--|------------------|------------------|------------------|--------------------|
| Project Director/Apprenticeship Coordinator. | | | | |
| Total Personnel | | | | |
| Fringe | Year I | Year II | Year III | Total |
| Project Director/Apprenticeship Coordinator. | | | | |
| Total Fringe Benefits | | | | |
| Travel | Year I | Year II | Year III | Total |
| Staff. | | | | |
| Total Travel | | | | |
| Supplies | Year I | Year II | Year III | Total |
| Office. | | | | |
| Total Supplies | | | | |
| | | | | |
| Contractual | Year I | Year II | Year III | Total |
| | | | | |
| Total Contractual | 0 | 0 | 0 | 0 |
| Other | Year I | Year II | Year III | Total |
| Tuition and Fees. | | | | |
| Total Other | | | | |
| Indirect Costs | Year I | Year II | Year III | Total |
| Total Indirect Costs | | | | |
| Total Direct Costs | | | | |
| Total Indirect Costs | | | | |
| Total Federal Funds Requested | \$398,758 | \$583,866 | \$517,376 | \$1,500,000 |

Processes to consider

(Mellie's thoughts)

- ***Look around you.*** Is another organization applying for this opportunity and is there an opportunity to partner?
- Start with the workplan.
- ***Again, look around you.*** Are there other organizations doing this work or is there a way to leverage what is already there to make the application even more successful.
- Consider: Does our organization have the capacity to manage this project? Does this project fit in our strategic/ long-term plans?
- ***Again, look around you.*** Are you the right applicant or is there another organization that might be better suited to partner with?
- Next- what are the barriers & challenges for implementation of the project.
- ***Again, look around you.*** Who can you pull into your project that can help you address these obstacles?

“Success doesn’t necessarily come from breakthrough innovation but from flawless execution. A great strategy alone won’t win a game or a battle; the win comes from basic blocking and tackling.” — **Naveen Jain**